



Optimizing the Prevention of Herpes Zoster in Older Adults

Dear Colleague:

Herpes zoster (HZ) is increasingly common as people age, and is often associated with painful, debilitating complications, yet the disease and its aftermath can be prevented through vaccination. This CME-certified activity, *Optimizing the Prevention of Herpes Zoster in Older Adults*, highlights common HZ sequelae and factors contributing to low vaccination rates, along with steps to promote vaccination and protect at-risk older populations.

Acute HZ occurs in approximately one-third of all individuals and half of those who survive to age 85.

- Beyond age 50, the risk and incidence of zoster escalates dramatically with increasing age.
- Rates and risk of complications also increase with age.

The most common complications of HZ are post-herpetic neuralgia (PHN) and herpes zoster ophthalmicus.

- PHN may occur even with optimal treatment of acute HZ. The pain is severe and may persist for months to years, often with severe effects on quality of life.
- Zoster ophthalmicus requires immediate attention from an ophthalmologist to help prevent or limit vision loss.

The best way to prevent HZ and its complications is through vaccination.

- The HZ vaccine is FDA-approved for adults ages 50 years and older and recommended by the Advisory Council on Immunization Practices (ACIP) for patients ages 60 years and older.
- Because vaccine-induced immunity wanes over time (lasting about 5 years) and because people are increasingly susceptible to HZ with age, vaccination at or after age 60 years optimizes protection.

Rates of HZ vaccination are unacceptably low for various reasons, including physician- and patient-level barriers.

- In 2015, fewer than one-third of adults ages 60 years and older had received the vaccine.
- Physician-level barriers include cost of storage, and time constraints when patients have other, ostensibly more pressing health concerns. To help overcome these barriers, physicians may send patients to pharmacies or public or community health clinics for vaccination.
- Patient-level barriers include needle phobia and out-of-pocket costs. To help manage needle phobia, physicians or clinical staff can take steps to reduce anxiety and prevent pain. As for cost, one strategy is to explain that treating HZ complications may be far more expensive than vaccination. In addition, patients lacking insurance coverage may be eligible for vaccine assistance programs.



Providing a strong, clear recommendation can be critical to motivating patients to get the HZ vaccine

- Avoid simply *suggesting* or *asking* patients if they want the vaccine
- Instead, state “you *need* this vaccination” or “I *want you* to have this vaccination *today*.”

Primary care physicians have a pivotal role in the prevention of HZ and HZ-associated complications in older adults by actively pursuing vaccination in this vulnerable population.

Yours sincerely,



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